

State of Connecticut

GENERAL ASSEMBLY



PERMANENT COMMISSION ON THE STATUS OF WOMEN

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**Testimony before the Public Health Committee
By Natasha M. Pierre
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The Permanent Commission on the Status of Women
Thursday, February 7, 2005**

In support of

HB6588, An Act Requiring Health Insurance Coverage for Infertility Treatment and Procedures

Good morning Senator Murphy, Representative Sayers and members of the committee. My name is Natasha Pierre and I am the Associate Legislative Analyst for the Permanent Commission on the Status of Women. Thank you for this opportunity to testify in favor of HB 6588 An Act Requiring Health Insurance Coverage for Infertility Treatment and Procedures.

The PCSW supports this proposed legislation, which would require individual and group health insurance policies to cover medically necessary expenses for the diagnosis and treatment of infertility. Infertility is a disease of the reproductive system, which affects one in five couples during their reproductive years. Unfortunately, couples today not only face the emotional pain associated with not being able to have a child, but they also face health insurance obstacles.

In 1989, the legislature acknowledged the need for infertility coverage with Public Act 89-120, now codified as C.G.S Section 38a-536, which mandates that group policies offer coverage for medically necessary expenses of diagnosis and treatment of infertility, including in-vitro fertilization procedures (this bill would modify that statute, however, the intent to provide group coverage is still maintained). Despite this mandate, some insurers refuse to provide coverage for this procedure on the basis that infertility is not an

illness, that treatment is not medically necessary, or that treatment is experimental. The bases for these denials are unfounded.

The courts have ruled that infertility is an illness in Witcraft v. Sundstrand Health & Disability Group Benefit Plan¹. “Medically necessary” is usually defined by insurance policies as medically required and appropriate for diagnosis and treatment of an illness or injury under professionally recognized standards of healthcare. Infertility coverage falls under the purview of an illness that requires treatment. Finally, infertility treatments have not been on the American Medical Association’s experimental list since the late 1980s.

We support reproductive choice for all women, and we do not believe that infertility treatment should be limited to those with the economic means to pay for it out of pocket. This legislation would allow infertile couples to take advantage of modern treatments, thereby truly providing reproductive choice and access to all. We urge passage of this bill.

Thank you.

¹ Witcraft v. Sundstrand Health and Disability Group Ben. Plan, 420 N.W. 2d, Iowa (1988).

